LOBBYING EXPENDITURE REPORT COVERING JANUARY 1 THROUGH JUNE 30 DUE AUGUST 15	Lobbyist's Registration Number
COVERING JULY 1 THROUGH DECEMBER 31 DUE FEBRUARY 15	FOR OFFICE USE ONLY Postmark Date: [1 2 1 02-
Instructions	ER 2-
 Print in ink or type. Fill in Registration Number in spaces provided. Complete form and return to the Heard of Fithies, 2415 Quail Dr., 3^{rl} Floor, Baton Rouge, I.A 70808 (225) 763-8777 or (800) 842-6630. This form must be delivered or postmarked by the fine date. This form may be faxed to (225) 763-8787. 	1021536
1. Name France. He. Leve	/1/ M1-
2. Business Address 1.2015 15 lette a very (1. 1)	in State Zip
Mailing Address 1.10.114	
3. Business Phone // J G / 105 C / Area Code and Telephone Number	
Total of all expenditures made January 1 through June 30: S (Include expenditures from Schedules A and B)	<u> </u>
5. Total of all expenditures made July 1 through December 31: \$ (When Applicable) (include expenditures from Schesheles A and B)	<i>(</i> >
Total of all expenditures made during calendar year: (Line 4 added with Line 5 should equal Line 6)	<i>C</i>
7. Did you make an expenditure exceeding \$50 on one occasion for	any one legislator:
From January 1 through June 30? Yes I'm Normality 1 through December 31? Yes I'm N	o 🗆 NA 🖺 🛅
If the answer to either question in Number 7 above is YES, please	
	18 G
Form BCG, Him. 10/CG	720 A C C C C C C C C C C C C C C C C C C
Page 1 of	5555 129

LOBBYING EXPENDITURE REPORT

Lobbyist's Registration Number

	Did you make expenditures exceeding		ra´.,			
	From January 1 through June 30? From July 1 through December 31?	Yes Yes	□ No □ No		NA	
	If the answer to either question in Nu		is YES, please cor	nolete Se	hedule A and attac	h.
9.	Did you expend funds for a reception, social gathering, or other function to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subcommittee of any committee, recugnized caucus, or any delegation thereof were invited during the reporting period?					
	☐ Yes		No No			
	If the answer to Number 9 above is Y	'ES, please co	mplete Schedule l	B and atta	ich.	
	If the answer to Number 9 above is 3	řES, please co	mplete Schedule l	3 and atta	ch.	
			mplete Schedule I		ich.	
		RIFICATION	OF ACCURACY			:dge,
	ÇЮ	CITEICATION contained here	OF ACCURACY	eel to the	best of my knowle	
	CFI I hereby certify that the information	CIFICATION contained here sportable expens	OF ACCURACY in is true and corr aditures have bee	ect to the	best of my knowle ed herein; and tha	d no
	CEI I hereby certify that the information information, and belief; that all re-	CIFICATION contained here sportable expens	OF ACCURACY in is true and corr aditures have bee	ect to the	best of my knowle ed herein; and tha	d no

Form 802, Rev. 10/00